

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	6/1
FORMALITY REVIEW	2	535	07-31-01
RESPONSE FORMALITY REVIEW	8		05-23-02

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/3/02
2	✓	✓	7/3/02
3	✓	✓	7/3/02
4	✓	✓	7/3/02
5	✓	✓	7/3/02
6	✓	✓	7/3/02
7	✓	✓	7/3/02
8	✓	✓	7/3/02
9	✓	✓	7/3/02
10	✓	✓	7/3/02
11	✓	✓	7/3/02
12	✓	✓	7/3/02
13	✓	✓	7/3/02
14	✓	✓	7/3/02
15	✓	✓	7/3/02
16	✓	✓	7/3/02
17	✓	✓	7/3/02
18	✓	✓	7/3/02
19	✓	✓	7/3/02
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25	✓	✓	7/3/02
26	✓	✓	7/3/02
27	✓	✓	7/3/02
28	✓	✓	7/3/02
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31	✓	✓	7/3/02
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48	✓	✓	7/3/02
49	✓	✓	7/3/02
50	✓	✓	7/3/02

Claim	Final	Original	Date
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52	✓	✓	7/3/02
53	✓	✓	7/3/02
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100	✓	✓	7/3/02

Claim	Final	Original	Date
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102	✓	✓	7/3/02
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104	✓	✓	7/3/02
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148	✓	✓	7/3/02
149	✓	✓	7/3/02
150	✓	✓	7/3/02

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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804-11-29  
 05/29